

IAP20 Rec'd PTO 17 JAN 2006

- a. ☐ A check in the amount of \$ _____ to cover the above fees is enclosed.
- b. ☐ Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees.
A duplicate copy of this sheet is enclosed.
- c. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment of Deposit Account No. 50-1513. A duplicate copy of this sheet is enclosed.
- d. ☒ Fees are to be charge to a credit card. **WARNING** : Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.37(a) or (b)) must be filed and granted to restore the International Application to pending status.

SEND ALL CORRESPONDENCE TO:

GARDNER GROFF, P.C.

2018 Powers Ferry Road

Suite 800

Atlanta, Georgia 30339

Tel: (770) 984-2300

Fax: (770) 984-0098

SIGNATURE

Bradley K. Groff

NAME

39,695

REGISTRATION NUMBER

FEE VALUE	
ACCOUNTABILITY	
DEPOSIT ACCOUNT NO.	
50	1513
FEE	VALUE
DATE	EXPIRATION
2617	65

Adjustment date: 10/26/2006 ATRAN1
 03/02/2006 CSM001 00000010 501513 10565120
 01 FC:1617 130.00 CR

10/26/2006 ATRAN1 00000012 501513 10565120
 01 FC:2617 65.00 DA